



## **NOTICE OF LOCAL BUILDING INSPECTION PROGRAM**

**NEW PROGRAM** ☐

**UPDATE TO EXISTING PROGRAM** ☐

\_\_\_\_\_  
Name of Jurisdiction

\_\_\_\_\_  
Today's Date

\_\_\_\_\_  
Chief Appointing Authority (Mayor or County Judge Executive) PRINTED NAME & SIGNATURE

### **INSPECTION PERSONNEL**

**CERTIFICATION LEVEL:** 1 & 2 Family (only) ☐, Level I ☐, Level II ☐, Level III ☐ or None ☐

\_\_\_\_\_  
Name of designated Building Inspector License Number Years certified

\_\_\_\_\_  
Name of designated Building Inspector License Number Years certified

\_\_\_\_\_  
Name of designated **Electrical Inspector** License Number Years certified

**List other associated building inspection personnel.** (Use additional pages if necessary)

\_\_\_\_\_  
Name Job title Years employed

\_\_\_\_\_  
Name Job title Years employed

**Local appeals Board:** ☐ YES ☐ NO If "Yes" is checked; a copy of the local ordinance creating the local appeals board and the current membership of the **Appeals Board** is included as EXHIBIT # \_\_\_\_\_. If "No" is checked, all appeals shall be referred to the Kentucky Board of Housing Appeals Committee **AND** the cost of the appeal shall be borne by the local government.

**Detached Single Family Dwelling Option:** ☐ YES ☐ NO If "Yes" is checked, a copy of the ordinances creating the single family dwelling inspection program or requiring electrical or other types of permits and inspections is included as EXHIBIT # \_\_\_\_\_.

**Schedule of Fees:** A copy of the local ordinance creating a fee schedule and the schedule of fees is included with this application as EXHIBIT # \_\_\_\_\_.

**Official Contact:** When referring persons to this agency or sending correspondence or other related information, contact shall be made with the following:

\_\_\_\_\_  
Name of Chief Building Official

\_\_\_\_\_  
Title

\_\_\_\_\_  
Name of Department

\_\_\_\_\_  
Business Phone

\_\_\_\_\_  
No. Street, Highway or other mailing address

\_\_\_\_\_  
Business Fax

\_\_\_\_\_  
City, State & zip code

\_\_\_\_\_  
E-Mail Address  
(if applicable)

### **RETURN COMPLETED FORM TO:**

Office of Housing, Buildings and Construction  
Division of Building Code Enforcement  
101 Sea Hero Road, Suite 100  
Frankfort, Kentucky 40601-5405 Fax: 502-573-1059

